

**EXHIBIT B**  
**D00031 through D00036**

V = Violative

C = (In) Compliance



## DELAWARE HEALTH AND SOCIAL SERVICES

## DIVISION OF PUBLIC HEALTH

## FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

NO = Not Observed

NA = Not Applicable

On an assessment this day, the items marked below with a "V" identify violations which must be corrected by the time(s) specified in §10.206 of State of Delaware Regulations Governing Public Eating Places. Failure to comply with the time limit(s) for correction of any violation(s) cited in this notice or failure to pay any fees resulting from follow-up inspection within 25 calendar days following this visit shall result in automatic permit suspension and immediate cessation of food service operations, in accordance with §10.207 of the Regulations. SEE BOTTOM OF ACCOMPANYING LIST OF OBSERVATIONS FOR ANY BILLING ASSOCIATED WITH THE CONDUCTION OF THIS INSPECTION.

FEPNAME

Sussex Correctional Institution

OWNNAME

Department of Correction

FEPADD

RD#1 PO Box 700

INSP START TIME

0930

FEPCTY

Georgetown

FEPSTATE

DE

FEPZIP

19947

FACID

PERMIT NO

OF

PERMIT EXPIR. DATE

INSPECTION DATE

INSPECTION

TIME(MIN.)

PURPOSE FOLLOW-UP(\*)

PURPOSE CODES: 1=Regular; 2=Follow-up; 3=Complaint; 4=Investigation; 5=Other \*If a Follow-up, enter 1, 2 or 3, otherwise, enter "N".

ITEM	WT.	ITEM	WT.	ITEM	WT.
FOOD					
41 SOURCE: SOUND CONDITION, NO SPOILAGE	<input checked="" type="checkbox"/>	14 PRE-FLUSHED, SOAKED, SCRAPPED	<input checked="" type="checkbox"/>	33 CARRIAGE AND REFUSE DISPOSAL	<input checked="" type="checkbox"/>
42 ORIGINAL CONTAINER PROPERLY LABELED	<input checked="" type="checkbox"/>	19 WASH, RINSE WATER	<input checked="" type="checkbox"/>	33 CONTAINERS OR RECEPTACLES COVERED; ADEQUATE IN NUMBER; INSECT/RODENT PROOF; CLEANED/DISINFECTED FREQUENTLY ENOUGH	<input checked="" type="checkbox"/>
FOOD PROTECTION		20 SANITIZATION RINSE: CLEAN, PROPER TEMPERATURE, CONCENTRATION, EXPOSURE TIME; EQUIPMENT AND UTENSILS SANITIZED	<input checked="" type="checkbox"/>	34 OUTSIDE STORAGE AREAS/ENCLOSURES: PROPERLY CONSTRUCTED; CLEAN; CONTROLLED INCUBERATION	<input checked="" type="checkbox"/>
43 POTENTIALLY HAZARDOUS FOOD MEETS TEMPERATURE REQUIREMENTS DURING STORAGE, PREPARATION, DISPLAY, SERVICE, TRANSPORTATION	<input checked="" type="checkbox"/>	21 WIPING CLOTHS CLEAN, PROPERLY STORED, USE RESTRICTED	<input checked="" type="checkbox"/>	INSECT, RODENT, ANIMAL CONTROL	
44 FACILITIES PROVIDED TO MAINTAIN PRODUCT TEMPERATURE	<input checked="" type="checkbox"/>	22 FOOD CONTACT SURFACES OF EQUIPMENT AND UTENSILS CLEAN, FREE OF ABRASIVES AND DETERGENTS	<input checked="" type="checkbox"/>	415 PRESENCE OF INSECTS/RODENTS MINIMIZED-OUTER OPENINGS PROTECTED, NO BIRDS, TURTLES OR OTHER ANIMALS	<input checked="" type="checkbox"/>
45 THERMOMETERS PROVIDED AND CONSPICUOUS	<input checked="" type="checkbox"/>	23 NON-FOOD CONTACT SURFACES OF EQUIPMENT AND UTENSILS CLEAN	<input checked="" type="checkbox"/>	FLOORS, WALLS AND CEILING	
46 POTENTIALLY HAZARDOUS FOOD PROPERLY THAWED	<input checked="" type="checkbox"/>	24 CLEAN EQUIPMENT AND UTENSILS PROPERLY STORED AND HANDLED	<input checked="" type="checkbox"/>	36 FLOORS PROPERLY CONSTRUCTED, DRAINED, CLEAN, IN GOOD REPAIR; COVERING INSTALLED PROPERLY; DUSTLESS CLEANING METHODS USED	<input checked="" type="checkbox"/>
47 UNWRAPPED AND POTENTIALLY HAZARDOUS FOOD NOT RE-SERVED	<input checked="" type="checkbox"/>	25 SINGLE-SERVICE ARTICLES PROPERLY STORED, DISPENSED, USED	<input checked="" type="checkbox"/>	37 WALLS, CEILING AND ATTACHED EQUIPMENT PROPERLY CONSTRUCTED, IN GOOD REPAIR, CLEAN SURFACES; DUSTLESS CLEANING METHODS USED	<input checked="" type="checkbox"/>
48 FOOD PROTECTED DURING STORAGE, PREPARATION, DISPLAY, SERVICE, TRANSPORTATION	<input checked="" type="checkbox"/>	26 NO RE-USE OF SINGLE SERVICE ARTICLES	<input checked="" type="checkbox"/>	LIGHTING	
49 HANDLING OF FOOD (ICE) MINIMIZED	<input checked="" type="checkbox"/>	WATER		38 LIGHTING PROVIDED AS REQUIRED; FIXTURES SHIELDED	<input checked="" type="checkbox"/>
50 IN USE FOOD (ICE) DISPENSING UTENSILS PROPERLY STORED	<input checked="" type="checkbox"/>	27 WATER SOURCE: SAFE; HOT AND COLD UNDER PRESSURE	<input checked="" type="checkbox"/>	VENTILATION	
PERSONNEL		SEWAGE		39 ROOMS AND EQUIPMENT VENTED AS REQUIRED	<input checked="" type="checkbox"/>
51 PERSONNEL WITH INFECTIONS RESTRICTED	<input checked="" type="checkbox"/>	28 SEWAGE AND WASTE WATER DISPOSAL	<input checked="" type="checkbox"/>	DRESSING ROOMS	
52 HANDS WASHED AND CLEAN, GOOD HYGIENIC PRACTICES FOLLOWED	<input checked="" type="checkbox"/>	PLUMBING		40 ROOMS CLEAN; LOCKERS PROVIDED; FACILITIES CLEAN, PROPERLY LOCKED, USED	<input checked="" type="checkbox"/>
53 CLEAN CLOTHES, HAIR RESTRAINTS USED	<input checked="" type="checkbox"/>	29 NO CROSS-CONNECTIONS, BACK SIPHONAGE, BACKFLOW	<input checked="" type="checkbox"/>	OTHER OPERATIONS	
FOOD EQUIPMENT AND UTENSILS		TOILET AND HANDWASHING FACILITIES		41 NECESSARY TOXIC ITEMS PROPERLY STORED, LABELED, USED	<input checked="" type="checkbox"/>
54 FOOD (ICE) CONTACT SURFACES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED	<input checked="" type="checkbox"/>	41 PROPER IN NUMBER, DESIGN AND INSTALLATION; CONVENIENT AND ACCESSIBLE	<input checked="" type="checkbox"/>	42 PREMISES MAINTAINED, FREE OF LITTER, UNNECESSARY ARTICLES; CLEANING/ MAINTENANCE EQUIPMENT PROPERLY STORED; NO UNAUTHORIZED PERSONNEL	<input checked="" type="checkbox"/>
55 NON-FOOD CONTACT SURFACES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED	<input checked="" type="checkbox"/>	32 TOILET ROOMS ENCLOSED WITH SELF-CLOSING DOORS; FIXTURES IN GOOD REPAIR, CLEAN; HAND CLEANSER, SANITARY TOWELS/TISSUE/HAND- DRYING DEVICES, PROPER WASTE RECEPTACLES PROVIDED	<input checked="" type="checkbox"/>	43 COMPLETE SEPARATION FROM LIVING/ SLEEPING QUARTERS AND LAUNDRY	<input checked="" type="checkbox"/>
56 DISHWASHING FACILITIES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED, OPERATED	<input checked="" type="checkbox"/>			44 CLEAN, SOILED LINEN PROPERLY STORED	<input checked="" type="checkbox"/>
57 ACCURATE THERMOMETERS, CHEMICAL TEST KIT, GAUGE COCK, #10 IF VALVE PROVIDED	<input checked="" type="checkbox"/>				
		FOLLOW-UP INSPECTION NEEDED			
		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			

RATING SCORE ("100" Less Weight of Items Violated)

084

Joseph Dudler  
Chief of Security & Inspection

SFID

Received By (Name and Title)

Inspected By (Name and Title)

EHS ID:



**DELAWARE HEALTH AND SOCIAL SERVICES  
DIVISION OF PUBLIC HEALTH  
FOOD ESTABLISHMENT INSPECTION REPORT**

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 10 calendar days for critical items (§ 8-405.11) or 90 days for noncritical items (§ 8-406.11).

ESTABLISHMENT: <u>5135X CORRECTIONAL INSTITUTION</u>	PERMIT NUMBER: <u>NA</u>	DATE: <u>03/04/2004</u>
ADDRESS: <u>10110 Box 700</u>	CITY: <u>GEORGETOWN</u>	STATE: <u>DE</u> ZIP: <u>19947</u>
PERSON IN CHARGE / TITLE: <u>CHRIS HEIN, FACILITY MANAGER</u>		TELEPHONE:
INSPECTOR / TITLE: <u>RC HOMMER, EHS II #918 MGR FOOD PROTECTION, DEH</u>		
INSPECTION TYPE: <u>ROUTINE</u> FOLLOW-UP COMPLAINT OTHER:		
INSP START TIME: <u>0930</u> TIME (MIN.): <u>120</u>		

Critical (X)	Repeat (X)	Code Reference	Violation Description / Remarks / Corrections
X		3-501.17	SAUCE PRODUCT IN PAN IN WALK-IN COOLER WAS NOT MARKED TO INDICATE CONSUME BY DATE (CORRECTED ON SITE)
		4-601.11	(C) NON-FOOD CONTACT SURFACES — SPRAY ARMS IN PRE-WASH TANK AND FIRST WASH COMPARTMENT WERE CLOGGED WITH DEBRIS.
X		4-703.11	POT/PAN WARE WASHER. FINAL RINSE TEMPERATURE DID NOT REACH 160°F AT UTENSIL LEVEL (MEASURED AT 145°F AND 152°F)
		6-303.11	LIGHTING INSIDE DELICED WARMER LESS THAN 200

*Paul Pull*  
Public Health & Safety - Inspection

000032

## FOOD ESTABLISHMENT INSPECTION REPORT

141

ESTABLISHMENT: <u>SUSSEX CORRECTIONAL INSTITUTION</u>		PERMIT NUMBER: <u>NA</u>	DATE: <u>03/04/2004</u>
Critical (X)	Repeat (X)	Code Reference	Violation Description / Remarks / Corrections
		6-501.11	QUARRY TILE THRESHOLD IN WALK-IN FREEZER - WAS CRACKED & BROKEN; NOT MAINTAINED IN GOOD REPAIR.
		6-501.11	QUARRY TILE COVE BASE AT FLIGHT-TYPE DISH MACHINE WAS CRACKED & NOT SEALED TO WALL; NOT MAINTAINED IN GOOD REPAIR. (WORK ORDER FILED)
X		6-501.111	(B) PRESENCE OF RODENT DROPPINGS AND LIVE ANTS WAS OBSERVED IN "BREAD/CEREAL" DRY STORAGE ROOM; ROUTINE INSPECTION AND REMOVAL OF DROPPING IS REQUIRED.
	X		END OF REPORT

*Paul Smith*  
 Chief of Security & Inspection

000033

V = Violative

C = (In) Compliance



## DELAWARE HEALTH AND SOCIAL SERVICES

## DIVISION OF PUBLIC HEALTH

## FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

NO = Not Observed

NA = Not Applicable

Based on an assessment this day, the items marked below with a "V" identify violations which must be corrected by the time(s) specified in §10.206 of State of Delaware Regulations Governing Public Eating Places. Failure to comply with the time limit(s) for correction of any violation(s) cited in this notice or failure to pay any fees resulting from follow-up inspection within 22 calendar days following this visit shall result in automatic permit suspension and immediate cessation of food service operations, in accordance with §10.287 of the Regulations. SEE BOTTOM OF ACCOMPANYING LIST OF OBSERVATIONS FOR ANY BILLING ASSOCIATED WITH THE CONDUCTION OF THIS INSPECTION.

FEPNAME

SUSSEX CORRECTIONAL INST.

OWNNAME

Department of Correction

FEPADD

RT 113 BOX 500

INST START TIME

1005

FEPCTY

Georgetown

FEPSTATE

DE

FEPZIP

19947

FACID

PERMIT NO

OF

PERMIT EXPIR. DATE

INSPECTION DATE

TIME(MIN.)

INSPECTION

02/14/05

095

7

PURPOSE CODES: 1=Regular; 2=Follow-up; 3=Complaint; 4=Investigation; 5=Other \*If a Follow-up, enter 1, 2 or 3, otherwise, enter "N".

ITEM	WT.	ITEM	WT.	ITEM	WT.
FOOD					
*41 SOURCE SOUND CONDITION, NO SPOILAGE	<input checked="" type="checkbox"/>	18 PRE-FLUSHED, SOAKED, SCRAPED	<input checked="" type="checkbox"/>	GARBAGE AND REFUSE DISPOSAL	
*42 ORIGINAL CONTAINER PROPERLY LABELED	<input checked="" type="checkbox"/>	19 WASH, RINSE WATER	<input checked="" type="checkbox"/>	23 CONTAINERS OR RECEPTACLES COVERED; ADEQUATE IN NUMBER; INSECT/RODENT PROOF; CLEANED/EMPTYED FREQUENTLY ENOUGH	<input checked="" type="checkbox"/>
FOOD PROTECTION		*20 SANITIZATION RINSE: CLEAN, PROPER TEMPERATURE, CONCENTRATION, EXPOSURE TIME; EQUIPMENT AND UTENSILS SANITIZED	<input checked="" type="checkbox"/>	24 OUTSIDE STORAGE AREAS/ENCLOSURES: PROPERLY CONSTRUCTED; CLEAN; CONTROLLED INCINERATION	<input checked="" type="checkbox"/>
*43 POTENTIALLY HAZARDOUS FOOD MEETS TEMPERATURE REQUIREMENTS DURING STORAGE, PREPARATION, DISPLAY, SERVICE, TRANSPORTATION	<input checked="" type="checkbox"/>	21 WIPING CLOTHS CLEAN, PROPERLY STORED, USE RESTRICTED	<input checked="" type="checkbox"/>	INSECT, RODENT, ANIMAL CONTROL	
FACILITIES PROVIDED TO MAINTAIN PRODUCT TEMPERATURE	<input checked="" type="checkbox"/>	22 FOOD CONTACT SURFACES OF EQUIPMENT AND UTENSILS CLEAN, FREE OF ABRASIVES AND DETERGENTS	<input checked="" type="checkbox"/>	*45 PRESENCE OF INSECTS/RODENTS MINIMIZED-OUTLET OPENINGS PROTECTED, NO BIRDS, TURTLES OR OTHER ANIMALS	<input checked="" type="checkbox"/>
*45 THERMOMETERS PROVIDED AND CONSPICUOUS	<input checked="" type="checkbox"/>	23 NON-FOOD CONTACT SURFACES OF EQUIPMENT AND UTENSILS CLEAN	<input checked="" type="checkbox"/>	FLOORS, WALLS AND CEILINGS	
*46 POTENTIALLY HAZARDOUS FOOD PROPERLY THAWED	<input checked="" type="checkbox"/>	24 CLEAN EQUIPMENT AND UTENSILS PROPERLY STORED AND HANDLED	<input checked="" type="checkbox"/>	34 FLOORS PROPERLY CONSTRUCTED, DRAINED, CLEAN, IN GOOD REPAIR; COVERING INSTALLED PROPERLY; DUSTLESS CLEANING METHODS USED	<input checked="" type="checkbox"/>
*47 UNWRAPPED AND POTENTIALLY HAZARDOUS FOOD NOT RE-SERVED	<input checked="" type="checkbox"/>	25 SINGLE-SERVICE ARTICLES PROPERLY STORED, DISPOSED, USED	<input checked="" type="checkbox"/>	37 WALLS, CEILING AND ATTACHED EQUIPMENT PROPERLY CONSTRUCTED, IN GOOD REPAIR, CLEAN SURFACES; DUSTLESS CLEANING METHODS USED	<input checked="" type="checkbox"/>
*48 FOOD PROTECTED DURING STORAGE, PREPARATION, DISPLAY, SERVICE, TRANSPORTATION	<input checked="" type="checkbox"/>	26 NO RE-USE OF SINGLE SERVICE ARTICLES	<input checked="" type="checkbox"/>	LIGHTING	
*49 HANDLING OF FOOD (ICE) MINIMIZED	<input checked="" type="checkbox"/>	WATER		38 LIGHTING PROVIDED AS REQUIRED; FIXTURES SHIELDED	<input checked="" type="checkbox"/>
10 IN USE FOOD (ICE) DISPENSING UTENSILS PROPERLY STORED	<input checked="" type="checkbox"/>	*47 WATER SOURCE: SAFE, HOT AND COLD UNDER PRESSURE	<input checked="" type="checkbox"/>	VENTILATION	
PERSONNEL		SEWAGE		39 ROOMS AND EQUIPMENT VENTED AS REQUIRED	<input checked="" type="checkbox"/>
*51 PERSONNEL WITH INFECTIONS RESTRICTED	<input checked="" type="checkbox"/>	*48 SEWAGE AND WASTE WATER DISPOSAL	<input checked="" type="checkbox"/>	DRESSING ROOMS	
*52 HANDS WASHED AND CLEAN, GOOD HYGIENIC PRACTICES FOLLOWED	<input checked="" type="checkbox"/>	PLUMBING		40 ROOMS CLEAN; LOCKERS PROVIDED; FACILITIES CLEAN, PROPERLY LOCATED, USED	<input checked="" type="checkbox"/>
13 CLEAN CLOTHES, HAIR RESTRAINTS USED	<input checked="" type="checkbox"/>	*49 NO CROSS-CONNECTIONS, BACK SIPHONAGE, BACKFLOW	<input checked="" type="checkbox"/>	OTHER OPERATIONS	
FOOD EQUIPMENT AND UTENSILS		TOILET AND HANDWASHING FACILITIES		*41 NECESSARY TOXIC ITEMS PROPERLY STORED, LABELED, USED	<input checked="" type="checkbox"/>
14 FOOD (ICE) CONTACT SURFACES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED	<input checked="" type="checkbox"/>	*51 PROPER IN NUMBER, DESIGN AND INSTALLATION; CONVENIENT AND ACCESSIBLE	<input checked="" type="checkbox"/>	42 PREMISES MAINTAINED, FREE OF LITTER, UNNECESSARY ARTICLES, CLEANING/ MAINTENANCE EQUIPMENT PROPERLY STORED; NO UNAUTHORIZED PERSONNEL	<input checked="" type="checkbox"/>
25 NON-FOOD CONTACT SURFACES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED	<input checked="" type="checkbox"/>	32 TOILET ROOMS ENCLOSED WITH SELF-CLOSING DOORS; FIXTURES IN GOOD REPAIR, CLEAN; HAND CLEANSER, SANITARY TOWELS/TISSUE/HAND- DRYING DEVICES, PROPER WASTE RECEPTACLES PROVIDED	<input checked="" type="checkbox"/>	43 COMPLETE SEPARATION FROM LIVING/ SLEEPING QUARTERS AND LAUNDRY	<input checked="" type="checkbox"/>
36 DISHWASHING FACILITIES PROPERLY DESIGNED, CONSTRUCTED, MAINTAINED, INSTALLED, LOCATED, OPERATED	<input checked="" type="checkbox"/>			44 CLEAN, SOILED LINEN PROPERLY STORED	<input checked="" type="checkbox"/>
*53 CURTATE THERMOMETERS, CHEMICAL KIT, GAUGE COCK (PS VALVE) PROVIDED	<input checked="" type="checkbox"/>				
		FOLLOW-UP INSPECTION NEEDED		RATING SCORE ("100" Less Weight of Items Violated)	
		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		093	

Joe Dudlek

Chief of Security &amp; Inspections

Inspected By (Name and Title)

EHS ID#

Received By (Name and Title)

000034





**DELAWARE HEALTH AND SOCIAL SERVICES  
DIVISION OF PUBLIC HEALTH  
FOOD ESTABLISHMENT INSPECTION REPORT**

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 10 calendar days for critical items (§ 8-405.11) or 90 days for noncritical items (§ 8-406.11).

ESTABLISHMENT: <u>STATE CORRECTIONAL INSTITUTE</u>	PERMIT NUMBER: <u>XIM</u>	DATE: <u>02/14/2005</u>
ADDRESS: <u>PC 113 BOX 500</u>	CITY: <u>GEORGETOWN</u>	STATE: <u>DE</u> ZIP: <u>19947</u>
PERSON IN CHARGE / TITLE: <u>LT J. ADKINS</u>	TELEPHONE: <u>M. Kint</u>	
INSPECTOR / TITLE: <u>RC HOFFNER EAST</u>	<u>RC HOFFNER EAST OAP</u>	
INSPECTION TYPE: <u>ROUTINE</u> FOLLOW-UP COMPLAINT OTHER: <u>DD</u>		
INSP START TIME: <u>1:00 PM</u> TIME (MIN.): <u>025</u>		

Critical (X)	Repeat (X)	Code Reference	Violation Description / Remarks / Corrections
		3-01.17	IMPROPER COLD HOLDING. INSET PAN OF PREPARED COLE SLAW WAS NOT PROPERLY DATE MARKED TO INDICATE THE CONSUME OR DISCARD-BY DATE.
		4-01.11	FINAL RINSE TEMPERATURE GAUGE AND INLET WATER PRESSURE GAUGE ON CONVEYOR-DRIVE MECHANICAL WARE- WASHER DO NOT INDICATE CORRECT TEMPS AND PSI.
		4-601.11	FOOD RESIDUES AND GREASE ACCUMULATED

## FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT:

SUSSEX CATERING &amp; RESTAURANT

PERMIT NUMBER:

N/A

DATE:

02/14/2005

Critical (X)	Repeat (X)	Code Reference	Violation Description / Remarks / Corrections
		4-601.11	(CONTINUED)
			ON NON-FOOD CONTACT SURFACES,
			I.E. SCRAP CHUTES UNDER GRATE
			GRIDDLES AND IN THE SKILLET.
		6-201.11	ONE LAY-IN CEILING PANEL OVER
			COOKLINE IS DAMAGED (WORK ORDER
			HAS BEEN SUBMITTED)
		6-202.11	PROTECTIVE SHIELD ON CAMP INSIDE
			WALK-IN FREEZER IS DAMAGED
		6-303.11	LIGHTING INTENSITY IN WALK-IN
			FREEZER IS LESS THAN 10 FC
			AT 30 INCHES ABOVE FLOOR.
			END OF REPORT